STATE OF MARYLAND

Ben Steffen EXECUTIVE DIRECTOR



MARYLAND HEALTH CARE COMMISSION

4160 PATTERSON AVENUE – BALTIMORE, MARYLAND 21215 TELEPHONE: 410-764-3460 FAX: 410-358-1236

Thursday, June 15, 2017

Minutes

Chairman Moffit called the meeting to order at 1:10 p.m., and welcomed back Commissioners Hafey, O'Connor, and Tomarchio.

Commissioners present: Fleig, Hafey, Metz, O'Connor, O'Grady, Phillips, Pollak, Sergent, Tomarchio, and Wang.

ITEM 1.

Approval of the Minutes

Commissioner Fleig made a motion to approve the minutes of the May 18, 2017 public meeting of the Commission, which was seconded by Commissioner Wang and unanimously approved.

ITEM 2.

Update of Activities

Ben Steffen, Executive Director, said the Rural Health Care Delivery Workgroup held public hearings to gather input from residents about health and health care in their communities. The public hearings were held in Caroline, Dorchester, Kent, Queen Anne's, and Talbot counties. He noted that state and local elected leaders attended the public hearings. Mr. Steffen said that staff continues to make progress in the development of its consumer website that includes the total costs for four r 'shoppable' episodes of care. He also said that Commission staff continues to collaborate with the Department of Health and the Health Services Cost Review Commission in developing Maryland's Comprehensive Care model.

David Sharp, Director of the Center for Health Information Technology and Innovative Care Delivery introduced and welcomed new staff member, Anene Onyeabo, program manager in the Center for Health Information Technology and Innovative Care Delivery. Ms. Onyeabo is a public health professional with experience in advocacy, policy, and HIV/AIDS issues. Prior to joining the Commission, she worked with The Taylor-Wilks Group for the Baltimore City Ryan

White (HIV/AIDS) Planning Council where she worked on HIV health policies and coordinated the council and its committees. Ms. Onyeabo received her undergraduate degree in psychology and Master's degree in public health from Morgan State University in Baltimore, Maryland.

ITEM 3.

ACTION: Cardiac Services Advisory Committee Membership Change

Eileen Fleck, Chief of Acute Care Policy and Planning, said that the Cardiac Services Advisory Committee, which is composed of cardiac surgeons, cardiologists, and hospital medical directors who advise the Commission on the development and evolution of issues that are important in the Commission's ongoing oversight of cardiac surgery and percutaneous coronary interventions. Ms. Fleck noted that any changes in membership of the Committee must be approved by the Commission. Staff recommended that Richard Pomerantz, M.D., an interventional cardiologist affiliated with St. Agnes Hospital in Baltimore, be appointed to the Cardiovascular Services Advisory Committee as a replacement for Juan Sanchez, M.D. Commissioner Fleig made a motion to approve the staff recommendation, which was seconded by Commissioner Pollak and unanimously approved.

ACTION: Cardiac Services Advisory Committee Membership Change is hereby **APPROVED**

ITEM 4.

Certificate of Need – Columbia Surgical Institute, L.L.C. (Docket No. 17-13-2391)

Columbia Surgical Institute, L.L.C. (CSI) applied for a Certificate of Need to expand its current physician outpatient surgical center (POSC) by converting an existing procedure room to a second outpatient operating room, thereby creating an ambulatory surgical facility, which requires CON review and approval. Angela Clark, Health Policy Analyst, presented the staff recommendation. Ms. Clark said that CSI is an ophthalmic POSC located in Elkridge (Howard County) that currently has one operating room and three non-sterile procedure rooms. Ms. Clark said that CSI proposed the conversion of an existing non-sterile procedure room to a second sterile operating room to accommodate growth in its case volume and the need for additional operating capacity by a growing surgical staff. Ms. Clark said that the total project cost is estimated to be \$216,925. Staff recommended that the Commission approve CSI's application. Commissioner Metz made a motion to approve the staff recommendation, which was seconded by Commissioner Sergent and unanimously approved.

ACTION: Certificate of Need – Columbia Surgical Institute, L.L.C. (Docket No. 17-13-2391) is hereby APPROVED.

ITEM 5.

ACTION: Certificate of Need – Franklin Square Hospital Center d/b/a MedStar Franklin Square Medical Center (Docket No. 16-03-2360)

Franklin Square Hospital Center doing business as MedStar Franklin Square Medical Center applied for a Certificate of Need to replace its current surgical facilities. Kevin McDonald, Chief of Certificate of Need, presented the staff recommendation. Mr. McDonald said that this project

would replace Franklin Square Medical Center's 16 operating rooms and support areas, which are currently located in two separate areas on the second floor of the hospital, with a 14-operating room surgical suite in a new two-story building that will connect to its inpatient tower. He said the primary objectives of the proposed project are to modernize outdated surgical facilities and consolidate services for efficiency. Mr. McDonald said the total project cost estimate is \$70,000,000. He said that Franklin Square Medical Center anticipates funding the project with \$39,670,000 in tax-exempt bonds, \$20,000,000 in fundraising, \$10,000,000 in cash, and \$330,000 in interest income from bond proceeds. Staff recommended approval of the application with one condition. Commissioner O'Grady made a motion to approve the staff recommendation, which was seconded by Commissioner Pollak and unanimously approved.

ACTION: Certificate of Need – Franklin Square Hospital Center d/b/a MedStar Franklin Square Medical Center (Docket No. 16-03-2360) is hereby APPROVED.

ITEM 6.

ACTION: COMAR 10.25.19 – State Recognition of an Electronic Advance Directives Service – Proposed Permanent Regulations

Angela Evatt, Chief of Health Information Exchange, presented the staff's recommendation for the adoption of proposed regulations that would develop a statewide Advance Directive Program that aims to facilitate diffusion of cloud-based technology to support the use of electronic advance directives. Ms. Evatt stated that draft regulations were released for informal public comment on May 19, 2017. She noted that comments were received from the Health Education Advocacy Unit in the Office of the Attorney General. Staff considered the comments in preparing the regulations. Staff recommended that the Commission adopt the regulations as proposed permanent regulations. Commissioner Pollak made a motion to adopt the regulations as proposed permanent regulations, which was seconded by Commissioner O'Grady and unanimously approved.

ACTION: COMAR 10.25.19 – State Recognition of an Electronic Advance Directives Service – Proposed Permanent Regulations are hereby ADOPTED.

ITEM 7.

PRESENTATION: Health Care Data Breaches: A Changing Landscape

Angela Evatt, Chief of Health Information Exchange, presented findings in its information brief, *Health Care Data Breaches: A Changing Landscape*. Ms. Evatt noted that health care organizations have become increasingly subject to data breaches due to employee actions and external attacks by cybercriminals. She stated that over the last several years, staff has worked to increase cybersecurity awareness among providers. The information brief contains recommendations for safeguarding protected health information and remediating data breach consistent with industry best practices. She noted that data used in staff's analysis came from the Office for Civil Rights at HHS, the entity that is responsible monitoring health care information security and fining covered entities and their business associates for HIPAA violations.

Overview of Upcoming Initiatives

Mr. Steffen said that, at the July meeting, staff will present Maryland's privately fully insured report; Surescripts will provide a presentation; and staff will present recommendations on a couple of Certificate of Need applications.

ITEM 9.

ADJOURNMENT

There being no further business, the meeting was adjourned at 2:50 p.m. following a motion by Commissioner O'Connor, which was seconded by Commissioner O'Grady and unanimously approved.